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APPLICATION NUMBER

FILING/RECEIPT DATE

FIRST NAMED APPLICANT

ATTORNEY DOCKET NUMBER

10/066,174

01/29/2002

Douglas C. Fisher

01-111

23843 HOWARD E LEBOWITZ 905 WEST MIDDLEFIELD ROAD NO. 971

MOUNTAIN VIEW, CA 94043

CONFIRMATION NO. 2717
FORMALITIES LETTER

0C000000007749566

Date Mailed: 03/29/2002

NOTICE TO FILE CORRECTED APPLICATION PAPERS Filing Date Granted

This application has been accorded an Application Number and Filing Date. The application, however, is informal since it does not comply with the regulations for the reason(s) indicated below. Applicant is given **TWO MONTHS** from the date of this Notice within which to correct the informalities indicated below. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a)

The required item(s) identified below must be timely submitted to avoid abandonment:

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

The required items noted below SHOULD be filed along with any items required above. The filing date of this nonprovisional application will be the date of receipt of the items required above.

- Total additional claim fee(s) for this application is \$99.
 - \$99 for 70 total claims over 20.

The balance due by applicant is \$ 99.

A substitute specification in compliance with 37 CFR 1.52 because:

Line spacing on the specification, claims, or abstract is not 1-1/2 or double spaced (See 37 CFR 1.52(b)).

Substitute drawings in compliance with 37 CFR 1.84 because:

drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1

inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. (5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

A copy of this notice <u>MUST</u> be returned with the reply.

Customer Service Center

Initial Patent Examination Division (703) 308-1202

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